

POSITION	ID NO.	DATE
CLASSIFIER	8	8-2-97
EXAMINER		1070
TYPIST		118157
VERIFIER		
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	7/16/97
Original	8/20/97
1	12/8/97
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SYMBOLS

- ✓ Rejected
- Allowed
- (through number) Canceled
- * Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Claim	Date
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